

SHIIP CAN HELP WITH

- Original Medicare A & B
- Medicare Part C Advantage Plans
- Medicare Part D Prescription Drug Plans
- Medicare Supplemental Insurance (Medigap)
- Medicare Claims
- Medicare Complaints
- Insurance Agent Complaints
- Long-term Care Insurance
- Medicare Savings Programs
- Extra Help

SHIIP DOES NOT:

- Provide legal assistance
- Make decisions for Medicare beneficiaries
- Promote specific products or offer policies for sale

SHIIP MAKES PRESENTATIONS

If an organization would like to host a SHIIP speaker to discuss Medicare and related topics, then call to schedule 1-800-224-6330.



LOCAL HELP FOR PEOPLE WITH MEDICARE



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NATIONAL DO NOT CALL REGISTRY
JOIN TODAY
1-888-382-1222
OR
www.donotcall.org



For more information contact
SHIIP:
1-800-224-6330
Insurance.shiip@arkansas.gov
www.insurance.arkansas.gov
Fax: 1-501-371-2781

MEDICARE



HEALTH INSURANCE

1-800-MEDICARE (1-800-633-4227)

NAME OF BENEFICIARY

JANE DOE

MEDICARE CLAIM NUMBER

000-00-0000

IS ENTITLED TO

HOSPITAL

MEDICAL

SEX

EFFECTIVE DATE

(PART A)

(PART B)

07-01-1986

07-01-1986

Start
HERE →

HEALTHCARE REFORM

IMPORTANT THINGS TO KNOW ABOUT MEDICARE

INFORMATION ABOUT MEDICARE CHANGES

- ◆ Annual Election Period time change
- ◆ Annual Wellness Visit
- ◆ No deductible or copayment/coinsurance for Preventative Screenings
- ◆ Discount in Donut Hole/Coverage Gap

2011 HEALTHCARE REFORM AND MEDICARE

WHAT IS MEDICARE?

Medicare is the federal health insurance for people age 65 and over and for many disabled individuals under age 65.

PARTS OF MEDICARE

1. Medicare Part A = Hospital Insurance
2. Medicare Part B = Medical Insurance
3. Medicare Part C or Medicare Advantage Plan = replace Medicare A & B
4. Medicare Part D = Prescription Drug Insurance

WHO IS ELIGIBLE FOR MEDICARE

1. Age 65 and over
2. Receive disability benefits from Social Security or the Railroad Retirement Board for at least 24 months
3. Have End-Stage Renal Disease
4. Have ALS (Amyotrophic Lateral Sclerosis) or Lou Gehrig's disease

★ ANNUAL ELECTION PERIOD CHANGES

TIME OF YEAR PEOPLE WITH MEDICARE CAN CHANGE PART C & D COVERAGE

2010 = NO CHANGE. Election period is Nov 15—Dec 31, 2010. If change is made, new coverage begins Jan. 1, 2011.

2011= NEW TIMEFRAME. Election period is Oct 15-Dec 7 every year. If change is made, new coverage begins Jan. 1 the following year.

★ DONUT HOLE OR COVERAGE GAP DISCOUNT

TIME OF YEAR PEOPLE WITH MEDICARE PART D MAY PAY FULL COST OF PRESCRIPTIONS

- 50% discount on brand name medication in coverage cap
- 7% discount on generic medication in the coverage gap

Medicare beneficiary gets "credit" for paying full cost of medication to exit coverage gap at \$4,550 out-of-pocket and begin catastrophic payments at 5%.

★ ELIMINATION OF DEDUCTIBLE AND COINSURANCE FOR PREVENTIVE SCREENINGS

Medicare pays for services to prevent illness like flu shots, mammograms, prostate cancer screenings, etc. On Jan. 1, 2011, people with Medicare Part B no longer have to pay a deductible (\$155 annual) or coinsurance (20%) for screenings with an "A" or "B" rating from the U.S. Preventive Services Task Force.

★ ANNUAL WELLNESS VISIT

STARTING IN 2011 MEDICARE WILL PAY THE FULL COST OF ONE PHYSICAL EXAM PER YEAR

- Medicare (and Medicare Advantage) will pay for a physical exam every 12 months
- Patient pays no
 - Part B deductible
 - Part B coinsurance
 - Part C copayment